## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

0 03 432

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			2				Г	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		* 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			) minus 3 =		* :			X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	ESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zer					r "0" in c	olumn 2		TOTAL	370	OR	TOTAL	
	C	LAIMS AS A	MENDED	- PAR	TII	11				71	OTHER	THAN
_		(Column 1)	(Colun					SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		2		X\$ 9=		OR	X\$18=	
	Independent	*	Minus ****  MULTIPLE DEPENDENT		T CL AIM	=		X42=		OR	X84=	1
_	FIRST PRESE	INTATION OF MI	JETIPLE DEF	PENDEN	I CLAIN			+140=		OR	+280=	
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	(Column 3)	٨٥	DII. 1 CE			ADDII. I EE				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, ' =
	Independent	*	Minus	***	4,12-2	-		X42=		OR	X84=	,
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		<b>'</b>   -	140=		OR	+280=	
								TOTAL	·····:	OR	TOTAL	
(Column 1) (Column 2) (Column 3)								DIT. FEE	· · · · · · · · · · · · · · · · · · ·		ADDIT. FEE	• •
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	HEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	*	Minus	**		=	,	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	E CL AINA	=	;	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT					ــــــــــــــــــــــــــــــــــــــ	'   <u> </u>	·140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE											TOTAL	
***	If the "Highest Nu	mber Previously P	aid For" IN THI	S SPACE	is less tha	n 3, enter "3."	اللم	DIT. FEE			ADDIT. FEE	L
		nber Previously Pai					er found	in the app	ropriate box	in col	umn 1.	